

**Issue Classification**

(Assistant Examiner) (Date)

*[Signature]* HV5  
(Legal Instruments Examiner) (Date)

Claims renumbered in the same order as presented by applicant						<input type="checkbox"/> CPA	<input type="checkbox"/> T.D.	<input type="checkbox"/> R.1.47					
Final	Original		Final	Original		Final	Original		Final	Original		Final	Original
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3	2		19	32			92			122			182
1	3		1	33			93			123			183
1	4		20	34			94			124			184
2	5		21	35			95			125			185
4	6		1	36			96			126			186
6	7		22	37			97			127			187
1	8		23	38			98			128			188
7	9		1	39			99			129			189
8	10		24	40			100			130			190
1	11		25	41			101			131			191
5	12		26	42			102			132			192
9	13		27	43			103			133			193
1	14		1	44			104			134			194
11	15		1	45			105			135			195
12	16		1	46			106			136			196
1	17		28	47			107			137			197
13	18		29	48			108			138			198
14	19		1	49			109			139			199
10	20		1	50			110			140			200
15	21		30	51			111			141			201
16	22		31	52			112			142			202
17	23		1	53			113			143			203
18	24		32	54			114			144			204
1	25		1	55			115			145			205
1	26		33	56			116			146			206
1	27		34	57			117			147			207
1	28		35	58			118			148			208
1	29		36	59			119			149			209
1	30		37	60			120			150			210